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JAPS ROC'S PCT/PTO 13 FEB 2006

IDS - 02/13/2006

P10/36/04 (01-03)
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	Subs	stitute for form 1449/PTO			Col	Herewith Achim Adam
		Application Number	Not Yet Assigned			
	INFORMATION DISCLOSURE			ISCI OSLIDE	Filing Date	
					First Named Inventor	Achim Adam
STATEMENT BY APPLICANT					Art Unit	
(Use as many sheets as necessary)				s necessary)	Examiner Name	
	Sheet	one	lof	one	Attorney Docket Number	710100-022

Examiner	Cite	Document Number	Publication Date	Name of Patentee or	Pages, Columns, Lines, Where
Initials*		Number-Kind Code ^{2 (Florous)}	MM-DD-YYYY	Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear
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